

## REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? 

Yes **夕** No

(CFA-4) **Summary Sheet** 

FILE NUMBER						
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TOTAL PAGES IN		CFA-4	REPORT			
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COMMITTEE INFORMATION		hour many	J.
	2000		- Inches
1. Full Name of Committee (as on Statement of Organization) Check if this is a new to Confuse Committee	name	COUL	9 9
2. Acronym or Abbreviated Name (if any)	3. Comm	ittee Telephone Nymber 7) &46-6545	3)
4. Mailing Address (address where all campaign finance correspondence is received)	heck If this	is a new address	
5. City, State, ZIP Code Carnel, IN 46033		Affiliation (if applicable)	
CANDIDATE INFORMATION (For Candidate's C	Committe	es Only)	
7. Full Name of Candidate (include any nickname)	8. Party	Affiliation or If Independe	nt Candidate
Diana L. Cardray	6	epublican	
9. Office Sought (Include district number, if any Not required for exploratory committee.)	10. Cou	nty of Residence	
TYPE OF REPORT		CONVENTION	ON CANDIDATES ONLY
11. Oheck one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Cor	nvention
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement	of Organization	) Post-Co	nvention
12. Reporting Periody From Through: 4/8/1/		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and Investments at the beginning of this reporting period.		24651.29	
14. Cash on hand and investments January 1, current year.		., = ,	24,651.29
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (use Schedule A)		-0-	- 0-
15b. Unitemized	,	14000	740.00
15c. Add lines 15a and 15b in both columns	BTOTAL	7 40.00	\$40.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	824,691.29	124,691.29
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itamized (use Schedule B) (Public Question: use Schedule C)		9250.00	\$850. €
17b. Uniternized		-0-	-0-
17c. Add lines 17a and 17b in both columns SU	JBTOTAL	\$ 850.00	\$ 850.00
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	723691,29	\$23,691.29
19. Debts OWED BY the committee (use Schedule D)		\$10,000.00	
20. Debts OWED TO the committee (use Schedule E)			
FICATION			FOR OFFICE USE ONLY
I CERTIFY T	S TRUE, COR	RECT AND COMPLETE	TOR OFFICE USE ONLY
Signature itle TREASURER		Date // 0///	
Signature		Date 4/10/[/	
WARNING: sale or used for any commercial purpo	se. (IC 3-9-4-	5) A person who knowingly	
files a fraud  Campaign F  and may be subject to civil penalties. (IC	curate report 3-9-4-16, IC	as required by the Indiana 3-9-4-17, IC 3-9-4-18)	



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(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17g of the Surmary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular perty committee). All cumulative expenses, including in-kind, regardless of emount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular perty committees) MUST be itemized on this schedule.

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (Le specdie)	COLUMN A AMOUNT THIS PERIOD	COLUME B CUMULATIVE YEAR-TO-DATE	SATE OF EXPENDITURE
Brian Poinderfer for	City Sudge		<sup>క్</sup> జ540	125000	عاءرادا
PODOX 595 Carmel, IN 4608A	City Judge	OtherPurpota:			
Friends of Rick Sharp	Bosinesperson.	Direct In-Kind Payment of Cebt Returned Contribution	250.00	-2000	<i>ച\ञा\11</i>
1481 Stormey Ridge Ct. Carmel, IN 44032	City Council	Other			
Card for Cource / 10517 Hyderark	asinessperson	Payment of Debt	4/60.60	\$ 100.0C	3/2/11
Carmel, IN 46032	city Council	DOther Purpose:			
Luci Inyder Campaign	Business sperson/	Direct In-Kind Peyment of Debt Returned Contribution	2500	\$ 250,00	(المنطود
Carmel IN 46033	City Courcil	Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution			
		OtherPurpose:	,		
.Code		Direct In-Kind Payment of Debt Returned Contribution			
		OtherPurpose:			
Code		Direct In-Kind Payment of Detrt Returned Contribution			···
		DitherPurpose:			
	<u> </u>	<u> </u>			
TOTAL OF ALL D	SUBTOTAL THIS PA AGES OF SCHEDULE B ON TH	GE OF SCHEDULE B	\$850		
TOTAL OF ALL P	Enter total on ITEM 17a of		\$ 850		

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### (CFA-4 SCHEDULE D) **DEBTS OWED BY THIS COMMITTEE**

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, Individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an Individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER			
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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT  NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Diana L. Cordray 11843 Stoney Bay Cr Cormer, IN 46033 LENDERS OCCUPATION: CLERK Treasurer		& 9 000. or Campaian Expenses	12/19/10	-0-	\$10,000.00
LENDERS OCCUPATION: CHECK Treasurer		Campaian Expenses			
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:				~~~	
				FIGGY BE CLER	
LENDER'S OCCUPATION:				1 - 1 - 1	Participan .
				AH 9: 0	and the second
LENDER'S OCCUPATION:				10.	
SUBTOTAL THIS PAGE OF SCHEDULE D				\$/0,018	
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)				\$/0,018	